

Faith  
Independent

DEC 27 2007

S.D. REC'D. OF STATE

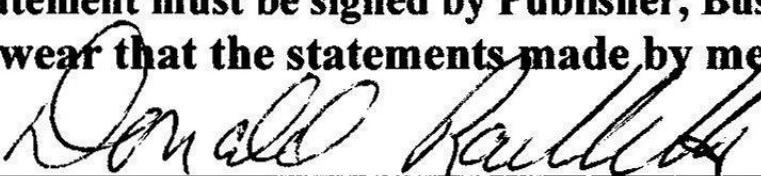
# STATE OF SOUTH DAKOTA

## Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER		2. DATE	
<i>The Faith Independent</i>		9-25-07	
3. FREQUENCY OF ISSUE	3A. NO. OF ISSUES PUBLISHED ANNUALLY	3B. ANNUAL SUBSCRIPTION PRICE	
<i>Weekly</i>	<i>52</i>	<i>\$27.00 in area out</i>	
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) <i>204 Main St., P.O. Box 38</i>			
<i>Faith Meade County, South Dakota 57626-0038</i>			
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) <i>Ravellette Publications, Inc.</i>			
<i>P.O. Box 788 Philip, SD 57547</i>			
6. FULL NAME OF PUBLISHER: <i>Donald Ravellette</i> P.O. Box 1033 Philip, SD 57547			
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)			
FULL NAME		COMPLETE MAILING ADDRESS	
<i>ON BACK</i>		<i>ON BACK</i>	
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.)			
<i>ON BACK</i>			
9. EXTENT AND NATURE OF CIRCULATION		AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)		<i>1000</i>	<i>1000</i>
B. PAID AND/OR REQUESTED CIRCULATION			
1. Sales through dealers and carriers, street vendors and counter sales.		<i>142</i>	<i>148</i>
2. Mail Subscription (Paid and or requested)		<i>608</i>	<i>590</i>
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)		<i>750</i>	<i>738</i>
D. FREE DISTRIBUTION			
1. BY MAIL, CARRIER OR OTHER MEANS		<i>63</i>	<i>64</i>
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES		<i>6</i>	<i>6</i>
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)		<i>819</i>	<i>808</i>
F. COPIES NOT DISTRIBUTED			
1. Office use, left over, unaccounted, spoiled after printing		<i>163</i>	<i>180</i>
2. Return from News Agents		<i>18</i>	<i>12</i>
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)		<i>1000</i>	<i>1000</i>

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public  
I swear that the statements made by me are true, correct, and complete:

  
(Signature)

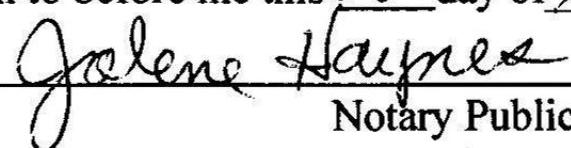
  
(Title)

State of South Dakota

)

Sworn to before me this 26 day of Sept, 2007County of Meade

)

  
Notary Public

(Seal)

My commission expires: 4-3-2009

**Owners:**

Ravellette Publications, Inc.  
P O Box 788  
Philip, SD 57567-0788

Donald Ravellette  
P O Box 633  
Philip, SD 57567-0633

**Bondholders, Mortgages & Other Security Holders:**

First National Bank  
P O Box 910  
Philip, SD 57576-0910

Luella Belle Ravellette  
P O Box 375  
Philip, SD 57567-0375